



Please type or print in ink.

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NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
HILL	JERRY	A.	(REDACTED)
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE ZIP CODE
OPTIONAL: E-MAIL ADDRESS			

### 1. Office, Agency, or Court

Name of Office, Agency, or Court:

California State Assembly

Division, Board, District, if applicable:

Your Position:

California State Assemblymember, District 19

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: California Council on Criminal Justice

Position:

### 2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of \_\_\_\_\_

☐ City of \_\_\_\_\_

☐ Multi-County \_\_\_\_\_

☐ Other \_\_\_\_\_

### 3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.

☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate Election Year: \_\_\_\_\_

### 4. Schedule Summary

► Total number of pages including this cover page: 8

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached  
Investments (Less than 10% Ownership)

Schedule A-2 ☒ Yes - schedule attached  
Investments (10% or Greater Ownership)

Schedule B ☒ Yes - schedule attached  
Real Property

Schedule C ☐ Yes - schedule attached  
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes - schedule attached  
Income - Gifts

Schedule E ☐ Yes - schedule attached  
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

### 5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed February 26, 2010

Signature

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <b>HILL, JERRY A.</b>
--

**▶ 1. BUSINESS ENTITY OR TRUST**

Hill's Pool Service, Inc.

Name

23 Edwards Court, Burlingame CA 94010

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2     ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Swimming Pool Service and Repairs

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☒ Corporation

Other

YOUR BUSINESS POSITION President/Shareholder

**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2     ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship

☐ Partnership

☐

Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☒ OVER \$100,000

☐ \$1,001 - \$10,000

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)**

See attached 2 pages.

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)**

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold

Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

2009  
HILL'S POOL SERVICE ACCOUNTS \$10,000.00+  
FORM 700  
SCHEDULE A-2 ATTACHMENT  
PAGE 1 OF 2

Name
170 OFF THIRD OWNERS ASSOC.
566 VALLEJO - CHANDLER PROP.
ACADEMY OF ART UNIV.
1050 CRESTA-HIGH/MARIN - BRAD HODACK - PRINCIPAL
C AND R CONSTRUCTION
CANADA COVE MOBILE HOMES
CARILLON TOWERS
C.H.P.A.C.
CITISCAPE
CLUB ONE AT FILLMORE CTR
CLUB ONE
CLUB ONE -- CITY CENTER
CLUB ONE PACIFIC SHORES
COMFORT INN
COURTYARD BY MARRIOTT
CPMC
CRYSTAL SPRINGS TERRACE
DANIEL BURNHAM
DIAMOND HEIGHTS VILLAGE
EL RANCHO INN & SUITES
EQUINOX HOLDINGS, INC.
FONTANA WEST
GOLDEN GATEWAY CLUB
GEORGE STALLOS
GLENN RICE
GRAMERCY ON THE PARK
HOLIDAY INN & EXPRESS
HYATT
INFINITY PROPERTY MGMT. - WINDWATER MILLS
INTERCONTINENTAL HOTEL
JANET POMEROY CENTER
JCC OF SAN FRANCISCO
JOHN GAHWILER CO.
LAKEWOOD APARTMENTS
LA PETITE BALEEN
LEGION OF HONOR
MARRIOTT HOTELS
MARTIN FAY
MERCY HIGH SCHOOL
MILLBRAE SWIM CLUB
MILLENNIUM TOWERS
MULQUEENEY & ASSOCIATES - WHALERS ISLAND H.O.A.
NORTHPARK APARTMENTS
NORTHPOINT INVESTORS

2009  
HILL'S POOL SERVICE ACCOUNTS \$10,000.00+  
FORM 700  
SCHEDULE A-2 ATTACHMENT  
PAGE 2 OF 2

Name
ONE EMBARCADERO SOUTH APTS
OPERA PLAZA
PACIFIC PLACE HOA
PALACE HOTEL
PARK PLAZA TOWERS
PENINSULA PLACE
PINE GOUGH ASSOC.
PON PAMCHON-ENOY
RADISSON HOTEL
RADISSON INN
SF BAY CLUB
SHERATON HOTELS
SHARON GREEN
SHARON HEIGHTS GOLF COURSE
SPRING VALLEY CONDOS-VIP REAL
SEQUOIA HIGH SCHOOL DISTRICT
THE BEACON H.O.A.
TITAN MANAGEMENT GROUP
UNITED DOMINIUM REALTH
W HOTEL
WATERMARK H.O.A.
WINSTON SQUARE H.O.A.
WOODLAKE ASSOCIATION
YMCA
FARALLON HOA
ALTA MAR at THE RIDGE
BAY VISTA
ISLANDS J H.O.A.
LIGHTHOUSE COVE H.O.A.
OAK GROVE CONDO. ASSOC.
PORT ROYAL MASTER ASSOC.
PORTSIDE CONDOS.
PROMONTORI POINT
THE GARDENS CONDO.
THE MANOR ASSOC.

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <div style="text-align: center;">HILL, JERRY A.</div>
--

**1. BUSINESS ENTITY OR TRUST**

The Estheticians Skin Care Center\*\*

Name

315 N. San Mateo Drive, San Mateo, CA 94401

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Skin Care

**FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

**NATURE OF INVESTMENT**

☐ Sole Proprietorship    ☒ Partnership

☐ Other

YOUR BUSINESS POSITION NONE

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☒ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

Spa Luxe\*\*

Name

272 Redwood Shores Pkwy, Redwood City, CA 94065

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Spa Services

**FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

**NATURE OF INVESTMENT**

☐ Sole Proprietorship    ☒ Partnership

☐ Other

YOUR BUSINESS POSITION NONE

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499

☐ \$10,001 - \$100,000

☐ \$500 - \$1,000

☐ OVER \$100,000

☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)**

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☐ INVESTMENT

☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

\_\_\_\_/\_\_\_\_/09

\_\_\_\_/\_\_\_\_/09

ACQUIRED

DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust

☐ Stock

☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments: \*\*These businesses are the sole & separate property of my spouse.

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**

Name \_\_\_\_\_  
HILL, JERRY A.

► STREET ADDRESS OR PRECISE LOCATION  
51 East Court Lane\*\*

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CITY  
Foster City, CA 94404

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FAIR MARKET VALUE      IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000      \_\_\_\_/\_\_\_\_/09      \_\_\_\_/\_\_\_\_/09

☐ \$10,001 - \$100,000      ACQUIRED      DISPOSED

☒ \$100,001 - \$1,000,000

☐ Over \$1,000,000

---

NATURE OF INTEREST

☒ Ownership/Deed of Trust      ☐ Easement

☐ Leasehold \_\_\_\_      ☐ \_\_\_\_

Yrs. remaining      Other

---

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000      ☐ OVER \$100,000

---

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Bruce and Melody Ho

---

NAME OF LENDER\*

---

ADDRESS (Business Address Acceptable)

---

BUSINESS ACTIVITY, IF ANY, OF LENDER

---

INTEREST RATE	TERM (Months/Years)
_____ % <input type="checkbox"/> None	_____

---

HIGHEST BALANCE DURING REPORTING PERIOD

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> Guarantor, if applicable	

FPPC Form 700 (2009/2010) Sch. B  
FPPC Toll-Free Helpline: 866/ASK-FPPC [www.fppc.ca.gov](http://www.fppc.ca.gov)

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

HILL, JERRY A.

► STREET ADDRESS OR PRECISE LOCATION  
100 Hearst Avenue  
CITY  
San Francisco, CA 94131

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/09      \_\_\_\_/\_\_\_\_/09  
ACQUIRED      DISPOSED

NATURE OF INTEREST  
☒ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold \_\_\_\_\_      ☐ \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
Carmen Gaytan

► STREET ADDRESS OR PRECISE LOCATION  
205-215 Coombs Street  
CITY  
Napa, CA 94559

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/09      \_\_\_\_/\_\_\_\_/09  
ACQUIRED      DISPOSED

NATURE OF INTEREST  
☒ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold \_\_\_\_\_      ☐ \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
Crown Property Management

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name HILL, JERRY A.
---

► NAME OF SOURCE  
 Speaker Karen Bass (Karen Bass for Assembly 2008)  
 ADDRESS (Business Address Acceptable)  
 777 S. Figueroa St, #4050 Los Angeles, CA 90071  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Political Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 8 / 09	\$ 72.52	Jacket
1 / 26 / 09	\$ 59.55	Dinner
/  /	\$	

► NAME OF SOURCE  
 California Democratic Party  
 ADDRESS (Business Address Acceptable)  
 1401 21st Street, #200, Sacramento, CA 95811  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Political Party

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 8 / 09	\$ 73.26	Dinner
/  /	\$	
/  /	\$	

► NAME OF SOURCE  
 California Building Industry Association  
 ADDRESS (Business Address Acceptable)  
 1215 K Street, Suite 1200, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Trade Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 15 / 09	\$ 93.75	Dinner
/  /	\$	
/  /	\$	

► NAME OF SOURCE  
 13 Healthcare/Life Sciences Entities  
 ADDRESS (Business Address Acceptable)  
 No single entity provided a gift of \$50 or more  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Healthcare & Life Sciences

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 28 / 09	\$ 216.88	Reception & Dinner
/  /	\$	
/  /	\$	

► NAME OF SOURCE  
 California Tribal Business Alliance  
 ADDRESS (Business Address Acceptable)  
 1530 J Street, Suite 250, Sacramento, CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Indian Tribes Business Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 14 / 09	\$ 88.77	Reception
/  /	\$	
/  /	\$	

► NAME OF SOURCE  
 ADDRESS (Business Address Acceptable)  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

Comments: \_\_\_\_\_